

Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

OCT 15, 2009

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone

: (80C)494-3124 Fax Number : (561)455-9885 **EXAMINER**

FLORIDA/FOREIGN LIMITED LIABILITY CO.

JAMBAM LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

JAMBAM LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

20381 NE 30TH AVE. APT 222 AVENTURA, FLORIDA 33180

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

ESTEBAN ALOIA MACRETT

20381 NE 30TH AVE. APT 222

AVENTURA, FLORIDA 33180

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

ESTEBAN ALOIA MACRETT / Registered Agent's signature

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SECHETARY OF STATE

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JAMBAM LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

JACINTO JESUS ALONSO DE MIER

AVENIDA DE SAN LUIS 95 4-G

MADRID, SPAIN 28033

MANAGING MEMBER:
BLANCA ISABEL ALVAREZ DEL MANZANO SANS
AVENIDA DE SAN LUIS 95 4-G
MADRID, SPAIN 28033

Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

JACINTO JESUS ALONSO DE MIER Typed or printed name of signee SECRETARY OF STATE

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